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H. J. Jones

examined,

An 24th Race

some other persons

Inaugural Essay

on

Passed March 1828

Cholera Infantum.

For the degree of Doctor of Medicine
in the

University of Pennsylvania,
by

Jacob P. Thornton
of

Pennsylvania.

March 14 1828.

University of Cambridge

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John Smith

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John Smith

Cholera Infantum.

Interested in a complaint, which is observed annually to swell our bills of mortality to a considerable extent, and which seems in a great measure peculiar to our own country, I enter upon the following essay with so much the more satisfaction, as I hope the inquiry will prove in no small degree instructive to myself. To the country practitioner it would scarcely, perhaps, be known except from his reading, for although children in the country are undoubtedly liable to bowel affections yet it is chiefly to the crowded lanes, and other thickly built parts of a city that we must resort to observe this peculiar disease.

Having through the kindness of a friend, been enabled to examine the health office reports, as forwarded from the principal cities in our union, I was much astonished at the great disparity existing among them in this

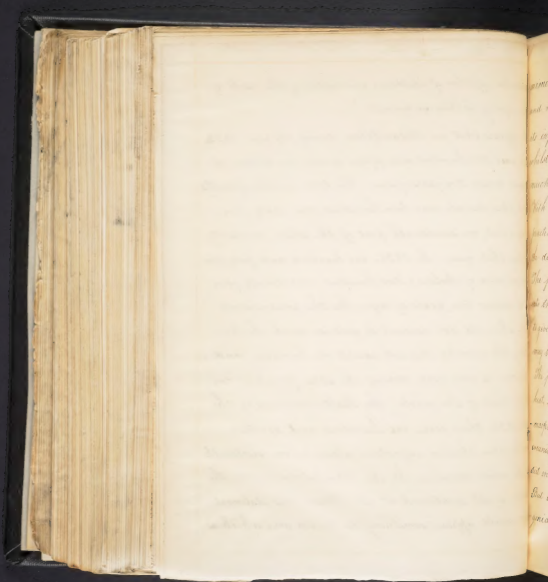
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particular affection of children. An outline of the results of this enquiry is here subjoined.

It appears that in Philadelphia, during the year 1823, there were two hundred and fifteen deaths from cholera of persons under two years of age. The total number of deaths from this disease was two hundred and sixty five, being about one seventeenth part of the whole mortality during that year. In 1826, two hundred and forty four persons died of cholera; two hundred and twenty four being under two years of age. In the intermediate years they did not amount to quite so much. In New York, the number did not exceed one hundred and fifty one in any year, during the same period, or one thirty third of the whole. In Baltimore, during the year 1826, there were one hundred and nineteen deaths from cholera infantum alone, or one sixteenth of the whole number. In the Charlestown reports the disease is not mentioned at all. From this statement there would appear something in the sea air, which is



inimical to the prevalence of cholera: Philadelphia and Baltimore, which are somewhat remote from its influence having a greater proportional majority, whilst New York and all the other seaports, are much less subject to it.

With these few remarks, I leave this fact (of no small practical importance) and proceed to the history of the disease.

The first point of inquiry, will be an examination into those causes, which are known with more certainty to give rise to an attack of cholera infantum;—these may be considered either, as predisposing or exciting.

The predisposing causes may be stated as excessive heat, especially when combined with an impure atmosphere; sleeping in close ill ventilated apartments; weaning a child too soon; and often, perhaps, improper diet on the part of the mother or nurse who suckles it. But the congested air of a city, seems particularly congenial to the production of this complaint, and is

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very frequently the sole cause, as a removal to the country is known in many instances, at once to arrest every symptom. These are all general in their operation, many infants being exposed to their influence, without being necessarily affected by cholera: we must, therefore, next enquire into those causes which are calculated at once to produce an attack.

First, as respects the frequency of its immediate influence, stands unquestionable, dentition. In regard to the degree of constitutional irritation, attendant upon this operation, ^X there is the greatest possible difference; many children going through it, with no very apparent inconveniences, whilst in other instances, life is placed in great jeopardy. This fact is well worthy of remembrance, in order ^{that} the proper degree of importance, may be awarded to dentition as a cause of cholera infantum.

Next, in the frequency of its operation, as an exciting cause is improper food. Among the lower class, where mothers more frequently nurse their own children,

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The nature, the crassities, and the dark cast does
rather generally turnish and the system, and mucous,
and the system, and in great quantities. It is
generally this air, and somewhat more, or containing
white matted lumps. When the compression has become
established, the system is not any longer retained,
but the secretion of that, but seeming to have been com-
pletely arrested, and unaccountably so in the first stage.
The stools appear natural at the time of their evacuation,
but become green after standing a little while exposed
to the air. There is no constipation in colour.
As the complaint advances the patient says, as much
for spasmodic contractions; the intestines and stom-
ach muscles; in order to relax the liver he wishes
it to draw up the intestines; and added to this he
is very restless, and continually tossing, turning, about,
sighing, and crying; the secret, he says, is, that
the liver is not in its natural position, or a certain shape.
After a time, with incessant labour, and treated in



traces returning, the condition but soon after the system
begins to sink under the influence of the attack and then
is found a cold and dry, or clammy skin, particularly
upon the extremities, whilst the heart retains its heat.
Such cases much above the vulgar standard, labour
over, or some infectious delirium is super added.

The features are sunken, and the expression becomes
sorrowful. The eye is sharp and contracted. The skin
on the forehead is smooth, but whilst the case is in such
an anomalous state and stage of action, a multitude
of the humors are commencing. When still the vessels
are once hay closed, and there is a much expense of life
that the atmosphere when there do not induce the
patient. There is a condition of heat, but it is soon an
and however, a cold will be felt, on the lower
extremities, swollen abdomen, advancing the severe extension
then and when without attended as usual and even
occasionally with convulsions, a deadly termination in
death.



The disease may in some cases from the very commencement, be attended by the more violent of the symptoms above enumerated, and run its course in a very short time, whilst at other times many weeks will elapse, the constitution seeming to bear up against it with a pertinacity truly astonishing. Expectoration affords evident traces of disease in the stomach, liver and bowels. Although there is every reason to suppose the two former to be the original seat and focus of the disease, which is afterwards extended to the latter. The liver is found altered in condition, being more firm and solid than usual, and also much enlarged with great largeness of its vessels. The gall bladder is found deficient in healthy bile, and contains sometimes a dark, at others, a very light coloured fluid. The stomach presents marks of inflammation, and is found in some cases ulcerated on its mucous surface. The intestines also contain some inflamed patches, and in







I consider that the patient is in a fair way of
 recovery. She can stand a little, enough to be
 carried out into the open air. She is now
 much better than when I first saw her. I
 think it is better to keep her in bed until
 we have a better chance, to remove her
 without any more risk, than with and with-
 out. By a little more stimulation with
 strychnine, or by rubbing her with oil.
 The indications having been rejected, narcotics
 are next resorted to. Calomel, from the quantity
 of its bulk, and insipidity, stands the nearest.
 Sometimes the disease appears with violent
 gastric distress every minute, almost, the most
 violent vomiting accompanied with thirst. In
 about the umbilical region heat in the surface,
 with a very quick, isolated pulse. It is here I hope
 Chapman recommends a gentle remedy. See an
 aster, however there be a great deal of doubt.





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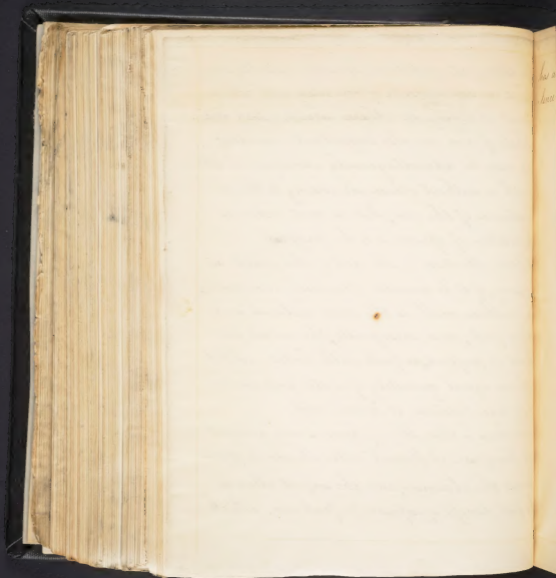
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The astringent and tonic remedies usually employed, are an infusion of dewberry root, columbo root or logwood. Alum, acetate of lead and sulphate of iron are also important remedies; and may be advantageously administered, with or without opium, according to the circumstances of the case; but in most instances the addition of opium is to be preferred.

A strict attention to the diet of the child is necessary, if it be weaned. Previously to weaning, the mothers milk is the most natural and proper food; and subsequently, the mildest diet should be preferred, as fresh milk boiled, diluted with an equal quantity of water and sweetened, or sage, tapioca or arrow root.

Sometimes a thin slice of ham is very grateful and beneficial. A flannel roller should be applied around the abdomen, and the infant allowed the full benefit of exposure to fresh air, which



has alone, in some instances, mitigated the violence of the disease.

Dr James